

CONFIDENTIAL

NAME TRACE REQUEST FORM

Date: _____

Ref/Control No.: _____

To : DAD _____ 513th XX A-2 XX OSI XX USAREUR
CENTRAL XX
REGISTRY

Date Due: _____

#8 MB 12 130

From: ONI _____ BIV _____ BND _____ ASBw _____
DAD, Munich

I. 1. NAME: MARTENS Wilhelm
Last First Middle

2. Aliases/Variants/Maiden Name: _____

3. Date of Birth: 17 April 1916

4. Place of Birth: Ratzeburg (Schleswig Holstein),
West Germany

5. Citizenship: a. Present _____

b. Previous _____

6. Present Residence: _____

7. Past Residences: _____

8. Present Employment (Occupation): _____

9. Past Employment: _____

10. Additional Information: _____

II. Agencies Previously Traced by Requestor and Dates: DAD _____ 66th _____ 513th _____
A-2 _____ OSI _____ ONI _____ BIV _____ BND _____ ASBw _____

Other (Specify) _____

III. Reason for Trace Request: OF SECURITY INTEREST TO THE EMD.
PLEASE INDICATE IN YOUR REPLY THAT PORTION SUITABLE FOR PASSAGE TO THE EMD.

RESULTS OF RECORD SEARCH

Date: 24 SEP 1966

- ☐ The Files of this organization reflect no record on Subject.
☐ The Files of this organization reflect the following information:

NO TRACES

DOWNGRADED AT 12 YR INTERVALS;
NOT AUTOMATICALLY DECLASSIFIED.
DOD DIR 8290.10

(Use Reverse Side for Additional Details)

NY-1 (Rev 12-52)

CLASSIFICATION
CONFIDENTIAL

Initials

DECLASSIFIED AND RELEASED BY
CENTRAL INTELLIGENCE AGENCY
SOURCE METHOD EXEMPTION 3B2
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2006